

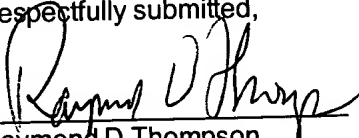
Remarks

Canceled Claims 5 , 9 and 10 are properly listed herein.

The Commissioner is hereby authorized to charge in addition to the separately enclosed one month extension of time fee, any other fees that may be required, or credit any overpayment, to Deposit Account No. 16-1445.

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Respectfully submitted,


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